PART B - FEE(S) TRANSMITTAL Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450 or Fax (703) 746-4000 INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks I through 4 should be completed where appropriate (it) further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as included limbers corrected below or directed otherwise in Block I, by (a) specifying a new correspondence address; und/or (b) indicating a separate "FEE ADDRESS" for piec fee notifications. CURRENT CORRESPONDENCE ADDITESS (Note: Legibly mark-up with any corrections or use Block 1) Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must 7590 04/06/2004 have its own certificate of mailing or transmission. Donald W. Meeker Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO, on the date indicated below. Patent Agent 924 East Ocean Front #E Newport Beach, CA 92661 (Depositor's name) (Signature) (Date) APPLICATION NO. **FILING DATE** FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO. 10/643,460 08/18/2003 Kelly J. Fisher 4102 TITLE OF INVENTION: ANTI-WRINKLE BRA FOR SLEEPING APPLN. TYPE SMALL ENTITY **ISSUE FEE** PUBLICATION FEE TOTAL FEE(S) DUE **DATE DUE** nonprovisional YES \$665 \$300 \$965 07/06/2004 **EXAMINER ART UNIT CLASS-SUBCLASS** HALE, GLORIA M 3765 450-057000 1. Change of correspondence address or indication of "Fee Address" (37 2. For printing on the patent front page, list (1) the CFR 1.363). DONALD W. MEEKER names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer attorneys or agents. If no name is listed, no name will be printed. Number is required. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignce is identified below, no assignce data will appear on the patent. Inclusion of assignce data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment, (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)

| Please check the appropriate assignce category or category | ories (will not be printed on the patent); | ☐ individual | a corporation or other private group entity | ☐ government |
|--|---|------------------|--|--------------|
| 4a. The following fee(s) are enclosed: | 4b. Payment of Fee(s): | | | |
| Issue Fee | A check in the amount of the fee(s) is enclosed. | | | |
| Publication Fee | Payment by credit card. Form PTO-2038 is attached. | | | |
| Advance Order - # of Copies | The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number (enclose an extra copy of this form). | | | |
| Director for Patents is requested to apply the Issue Fee | and Publication Fee (if any) or to re-apply | any previously p | paid issue fee to the application identified above | ve. |
| (Authorized Signature) NOTE: The Issue Fee and Publication Fee (if require) | (Date) June 7, 200 ired) will not be accepted from anyone | 4 | | |

other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

06/09/2004 WABRHAM2 00000213 10643460

01 FC:2501 02 FC:1504 665.00 OP 300.00 OP

TRANSMIT THIS FORM WITH FEE(S)

PTOL-85 (Rev. 11/03) Approved for use through 04/30/2004.

OMB 0651-0033 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE